Complaint Form Read this first!



Section 1

The Consumer Affairs Division of the Arizona Department of Financial Institutions provides this informational page as a useful resource to inform you of our complaint process. To ensure that your complaint is submitted to the proper regulatory agency, please read the following before completing and submitting a Complaint Form.

The Arizona Department of Financial Institutions does not regulate federally chartered National Banks, Credit Unions and Savings Banks or Credit Cards. If your complaint relates to business with these entities, please send your complaint to the appropriate agency listed below:

Office of the Comptroller of the Currency **Customer Assistance Group** If the complaint is against a National Bank or against a Credit Card 1301 McKinney Street issued through a national bank such as Bank of America, Houston, TX 77010 JPMorganChase, Wells Fargo Bank, First USA or any other national Toll-free - 800-613-6743 bank, your complaint should be sent to: Direct Dial - 713-336-4300 www.occ.gov National Credit Union Administration If the complaint is against a Federal Credit Union or against a Credit 1230 W. Washington Street, #301 Card issued through a federal credit union such as Desert Schools Tempe, AZ 85281 Federal Credit Union or Arizona Federal Credit Union or any other (602) 302-6000 federal credit union your complaint should be sent to: www.ncua.gov Office of Thrift Supervision San Franciso Regional Office Pacific Plaza, Suite 650 Savings Banks are all regulated at the federal level. If the complaint is 2001 Junipero Serra Blvd. against an entity that uses the words "Savings Bank" in its name, your Dalv City, CA 94014-1976 complaint should be sent to: (650) 746-7000 Fax (650) 746-7001 www.ots.treas.gov Federal Trade Commission If the complaint is against a Credit Card issued through a department 10877 Wilshire Blvd., Suite 700 store such as Macy's, Nordstrom, Robinsons-May or other similar credit Los Angeles, CA 90024 cards, your complaint should be sent to: Toll Free - 877-382-4357 - Help www.ftc.gov

Filing a complaint against entities regulated by the Department of Financial Institutions

If you have a complaint against an entity we regulate, you should first try to resolve it directly by contacting an officer of the entity. If for some reason you are unable to resolve the problem, you may wish to contact senior management or the entity's consumer affairs representative for further assistance. Dealing directly with the entity is usually the fastest, simplest, and most effective approach. Most companies value their customers and in most situations will be responsive to your concerns.

If you are unable to resolve your complaint directly, you may file a complaint with our agency, which is responsible for ensuring that the entities we regulate comply with applicable state laws.

FAX: (602) 381-1225

Telephone: (602) 255-4421 2910 North 44th Street, Suite 310 Phoenix, AZ 85018

See our website at www.azdfi.gov

Form: COMPLAINT-001 Revised 01/31/2006

Complaint Form Read this first!



Section 1

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What we will do once you submit a Complaint

We will assign a case number to your complaint and send you an acknowledgement that provides your case number. Your letter will be reviewed by our Consumer Affairs staff who will send your complaint to the named entity. This enables the entity to compile records in response to your complaint. If additional information is needed, we will contact you by telephone or in writing. If you should have any questions regarding the resolution of your complaint, please identify your case number when you contact us.

The entity should address the issues raised in your complaint and provide a written response to our agency upon completion of its internal review of the matter. In some cases, the entity will also respond to you directly. Consumer Affairs staff will analyze the entity's response to determine whether any applicable statutes were violated. We will attempt to resolve your complaint within 30 days. If we need additional time to resolve your complaint due to the complexity of the issues involved, we will usually send you a letter of explanation.

What result can I expect?

If our review of your complaint finds a violation of law or rule, we will inform you of the violation and the corrective action to be taken. However, we do not have authority to resolve contractual disputes or undocumented factual disputes between a customer and an entity. We also do not have the authority to resolve disagreements pertaining to the entity's policies and procedures that are a matter of management discretion and not addressed by the specific laws we enforce. In such cases, if the entity does not make a voluntary adjustment, we will usually advise you to consider obtaining legal counsel regarding your rights to resolve the situation. While this Department endeavors to intercede on behalf of complainants, the transactions at issue are not always within our authority as regulators. This Department's regulatory authority is limited to the laws passed in the legislature relating to a specific license type.

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Instructions:

- Please type or print in black ink.
- A copy of this complaint will be provided to the person or firm you are complaining against.
- Explain the problem in detail, include all important information, such as dates, places, contracts, letters, advertisements, sales slips or other documents that may support your complaint. Attach an additional sheet to explain the problem, if necessary. Keep all original supporting documents for your files.
- Please complete the complaint form and return it to our office. Our ability to assist you will depend upon your giving us a complete and detailed statement including any misrepresentation made to you.

Your Information:					
□ Mr. □ Ms. Name:					
☐ Mrs. ☐ Miss Address Line 1:					
Address Line 2:					
City: State:		State:	Zip Code:		
Home Phone:	Cell Phone:	Work Phone:	e:		
Firmeda) and dan Barranda) Carralaintia	and in at				
Firm(s) and/or Person(s) Complaint is against: Company Name:					
Company Name.					
Address Line 1:					
Address Line 2:					
Address Line 2.					
City:		State:	Zip Code:		
Phone:	FAX:				
Additional Information.					
Additional Information:					
1. Would you be willing to testify, under oath, regarding the matters set forth in this complaint? Yes No					
2. Have you complained to the firm(s) and/or person(s) involved?					
			s 🗌 No 🗌		
To whom?					
What was their response?					
3. Did you sign any documents?		Ye	es 🗌 No 🗍		
4. Have you contacted an attorney?			:S INO		
If Yes, please give Attorney's Name:			s □ No □		
Name:					
Address Line 1:					
Address Line 1.					
Address Line 2:					
City:		State:	Zip Code:		
If you answered Yes to Question #4 above, please be aware that the Department may be unable to act while there is					
pending litigation.					

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Section 2

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Description:			
Place of Transaction:			
Date of Transaction:	Witness to Transaction:		
Product or service involved:			
Other government agencies contacted:			
Please explain the entire circumstances surro	unding your complaint below.		
-			
-			
-			
Resolution:			
What action by the firm(s) and/or person(s) we	ould resolve this matter to your satisfaction?		
I verify, under penalty of law, that everything contained in the foregoing complaint is true and correct to the best of my knowledge and belief.			
Sig	nature of Complainant	Date	

Please include the original complaint form, a photocopy of the complaint form, and two (2) copies of all the supporting documents. Please keep all original support documentation.

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